FORM: APPN

## REV. 8/17/99

## STATE OF IDAHO - STARS APPROPRIATION INPUT

AGENCY NAME					AGENCY CODE		CONTACT NAME				PHONE # DA		
CURRENT DOCUMENT # BFY													
SFX	TC	RVS	INDEX	/PCA	EXP (	OBJ	AM	OUNT		BUDG	ET UNIT	FUND/DT	
					TO	ΓAL:							
<b>DESCRIPTION</b> (include House or Senate Bill number):													
AGENCY APPROVAL:								DATE:					
DFM APPROVAL:								DATE:					